

WASHINGTON STATE UNDERGROUND STORAGE TANK NOTIFICATION FORM

IMPORTANT: PLEASE READ ALL INSTRUCTIONS ON PAGES I-1 AND I-2 BEFORE ENTERING INFORMATION.

- ABOVEGROUND TANKS MUST BE REPORTED IF THE CONNECTED UNDERGROUND PIPING COMPRISES AT LEAST 10% OF THE OVERALL STORAGE SYSTEM (TANK AND PIPING).
- A SEPARATE FORM MUST BE USED FOR EACH SITE, EXCEPT FOR SITES WITH ONLY ONE TANK EACH. SEE THE GENERAL INSTRUCTIONS (PAGE I-2) FOR THE DEFINITION OF A SITE AND DETAILS ON REPORTING SITES WITH ONE TANK EACH.
- THERE IS ROOM IN SECTION VI FOR INFORMATION CONCERNING 15 TANKS. IF YOU HAVE MORE THAN 15 TANKS, PHOTOCOPY BOTH PAGES OF SECTION VI BEFORE ENTERING ANY INFORMATION. (IF YOU HAVE MORE THAN ONE SITE, EITHER OBTAIN MORE FORMS FROM THE DEPARTMENT OF ECOLOGY OR BE SURE TO ALSO PHOTOCOPY THIS PAGE.)
- PLEASE TYPE, OR PRINT IN INK; THE SIGNATURE UNDER "CERTIFICATION" (SECTION V) MUST BE SIGNED IN INK.

DEPT. OF ECOLOGY
MAY -5 85 007115
STATE USE ONLY

I. OWNERSHIP OF THE TANK(S)

Please enter information regarding the owner of the tank(s). If the ownership of the tank(s) is uncertain, enter information regarding the owner of the property where the tanks are located, or information regarding the former owner of the tanks. Please circle the correct letter, indicating who the information given below refers to:

A. OWNERSHIP UNCERTAIN ☐ B. CURRENT OWNER OF TANK(S) ☒ C. FORMER OWNER OF TANK(S) ☐ D. PROPERTY OWNER ☐

E. OTHER (PLEASE SPECIFY):

JERRY LORENZ

~~SHADE TREE ENTERPRISES, INC.~~

Owner Name (Corporation, Individual, Public Agency, or Other Entity)

COR OF MAIN AND ASH P.O. BX 83

Street Address

GLENWOOD

City

WA

State

98619-

ZIP Code

Klickitat

County

509-364-3471

Area Code

Phone Number

Type of Owner or Facility: CIRCLE CORRECT CODE(s)

CODE	TYPE	CODE	TYPE	CODE	TYPE	CODE	TYPE
<input checked="" type="radio"/> A	Service Station	G.	Industrial/Manufacturing	M.	City/Town	S.	Port District
B.	Bulk Plant	H.	Private Institution	N.	County	T.	Utility District
C.	Petroleum Distributor	I.	Residence (Non-Farm)	O.	State	U.	Fire Dept./District
D.	Convenience Store	J.	Farm	P.	Federal (Military)*	V.	Other Special Service District (e.g., sewer, water)
E.	Auto Dealer	K.	Airport	Q.	Federal (Non-Military)*	W.	Other
F.	Other Commercial/Retail	L.	Marina	R.	School District		

*FEDERAL FACILITIES ONLY: Please give your GSA Facility ID Number (Building Number).

II. CONTACT PERSON AT THE TANK LOCATION

The contact person should be the individual responsible for regularly monitoring the operation of the tank(s).

Owner Name (If same as Section I, mark box here ☒)

OWNER

Job Title

509-364-3471

Area Code

Phone Number

III. SITE OF THE TANK(S)

(If the same as Section I, mark box here. ☐)

See the General Instructions (Page I-2, 2.a.) for the definition of a site.

SHADE TREE ENTERPRISES INC.

Facility Name or Company Site Identifier, as applicable. (IF THE FACILITY IS OPERATED BY A LEASEE OR RENTER, THE NAME OF THE CORPORATION, INDIVIDUAL, PUBLIC AGENCY, OR OTHER ENTITY WHICH OPERATES THE FACILITY SHOULD BE ENTERED HERE.)

COR OF MAIN AND ASH

Street Address or State Road where the tanks are located. (IF NO STREET ADDRESS OR STATE ROAD, PLEASE ENTER THE LONGITUDE AND LATITUDE OR TOWNSHIP, RANGE, AND QUARTER SECTION WHERE THE TANKS ARE LOCATED.)

GLENWOOD

City

WA

State

98619-

ZIP Code

Klickitat

County

509-

Area Code

364-3471

Phone Number

IV. THE TOTAL NUMBER OF TANKS AT THIS SITE

1. Number of tanks containing petroleum, which are now in use: three
2. Number of tanks which have stored petroleum, but are not now in use: 0
3. Number of tanks containing regulated chemicals, which are now in use: 0
4. Number of tanks which have stored regulated chemicals, but are not now in use: 0

TOTAL NUMBER OF TANKS 3

Please mark this box if the site is located on land within an Indian reservation or on other Indian trust lands ☐

V. CERTIFICATION (Please read and sign after completing Section VI.)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents. To the best of my knowledge and belief, the submitted information is true, accurate, and complete.

Jerry Lorenz

Owner

Name and official title of owner or owner's authorized representative or, in cases where the ownership is unknown, the name and title of the person signing the form. (PLEASE TYPE OR PRINT IN INK.)

5-2-86

Date Signed

Jerry Lorenz Pres of Shade Tree Enterprises

Signature (PLEASE SIGN IN INK)

REGARDING INDIVIDUAL TANKS (See instructions regarding individual tanks, Page I-2)

[illegible]

INSTRUCTIONS FOR MAILING THE FORM

When the notification form is fully completed and signed, staple any photocopies of Section VI to page one of the form (not the instructions), with page one in the front. (Please staple once in the upper right corner.) The forms may then be folded and placed in an envelope for mailing or may be folded as described below for mailing without an envelope. FOR MAILING WITHOUT AN ENVELOPE: Fold the form(s) in half along the line in the center of the page, so that these instructions are on the outside, at the top. Then fold in half again, so that these instructions are still on the outside. When you turn the folded form(s) over, Ecology's address should be in the center, with blank lines for the return address in the upper left corner. Please enter your return address, staple once where shown, place the correct postage in the upper right corner, and mail.

PLEASE INDICATE THE NUMBER OF PHOTOCOPIED SHEETS ATTACHED (IF ANY) _____

Underground Storage Tank Notification
Solid and Hazardous Waste Program
Department of Ecology
Mail Stop PV-11
Olympia, Washington 98504-8711

STAPLE HERE WHEN FOLDED

Shade, Inc
P.O. Box 83
Glenwood, WA
98619

IMPORTANT
THIS IS AN UNDERGROUND STORAGE TANK NOTIFICATION FORM. A RECENT FEDERAL LAW REQUIRES
UNDERGROUND TANK OWNERS TO NOTIFY THE DEPARTMENT OF ECOLOGY OF THEIR TANKS BY MAY 8, 1986.
(CERTAIN ABOVEGROUND TANKS ARE ALSO INCLUDED.)
PLEASE OPEN FOR FURTHER INFORMATION.

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